COMMONWEALTH OF VIRGINIA

DEPARTMENT OF LABOR AND INDUSTRY POWERS-TAYLOR BUILDING

BOILER SAFETY COMPLIANCE PROGRAM 13 SOUTH THIRTEENTH STREET

RICHMOND, VIRGINIA 23219

APPLICATION FOR RECIPROCAL CERTIFICATE OF COMPETENCY AND IDENTIFICATION WORK CARD

Date:_____

For each full time Inspector listed below a. Reciprocal Certificate of b. Identification Work Card	Com	pete	ncy and an				ure Vessel In	spector's:
VA Use Only: Total Fees Received: \$	by: Date:							
				Date:				
NAME	A	В	NB	STATE	NO.	VA COC NO.	NEW ID CARD NO.	PROCESS FEE
							TOTAL: \$	
Inspection Agency's Name and Address	5							
	By:Inspection Agency							

For each named inspector:

- 1. Complete appropriate columns on an original and one copy of form BPV-3.
- 2. Complete form BPV-1 for each inspector for whom a Certificate of Competency is being requested and attach facsimile of Commission.
- Make check or money order payable to the <u>Treasurer of Virginia</u>.
 A processing fee of \$20 for each Identification Work Card requested must accompany this application.
 Certificate of Competency No Fee.
- Send all completed forms and total remittance to: Virginia Department of Labor and Industry 13 South Thirteenth Street Richmond, Virginia 23219

Requested Certificates of Competency, I. D. cards and a copy of BPV-3 form will be returned as a receipt.

For more information, contact: Ms. Frankie E. Steele

Email Address: fes@doli.state.va.us
Fax No.: (804) 371-2324
Telephone No.: (804) 786-3169